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# Urban District of Tettenhall

(STAFFORDSHIRE)

# ANNUAL REPORT

of the

Medical Officer of Health

for 1960



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# TETTENHALL URBAN DISTRICT COUNCIL

# PUBLIC HEALTH COMMITTEE

#### Chairman:

Councillor E. G. L. Pearce, J.P., C.C.

Councillor F. C. Hill, J.P. (Chairman of the Council).

- " Dr. S. C. Dyke.
- " S. O. Morton.
- " G. H. Poole.
- R. R. Wilson.

# PUBLIC HEALTH OFFICERS of the LOCAL AUTHORITY

Medical Officer of Health: (Acting)

F. B. MACKENZIE, D.S.O., M.C., M.A., M.B., Ch.B., D.P.H.

Public Health Inspector:

E. BARNES, M.A.P.H.I.

Assistant Public Health Inspector:

G. I. HYSLOP, M.A.P.H.I.

Clerical:

Miss V. M. J. WILLIAMS.

Official Address and Telephone No. of the Medical Officer of Health:

Council Offices, Upper Green, Tettenhall, Staffs.

Wolverhampton 52081-2-3

Private Telephone No.: Claverley 329.

# STATISTICAL SUMMARY, 1960.

Area: 2,503 acres.

Population: 14,020. (Estimated mid-year, 1960).

Number of Dometic properties: 4,601.

Sum represented by a Penny Rate: £718.

Rateable value: £182,834.

General Rate: £1 0s. 6d.

Birth Rate: 15.62. England and Wales: 17.1.

Death Rate: 10.91. England and Wales: 11.5

Infantile Death Rate per 1,000 births: 41.09 England Wales: 21.7.

Deaths from Respiratory Tuberculosis—Rate: Nil.

Deaths from other forms of Tuberculosis—Rate: Nil.

Deaths from Cancer of the Lung: 7.

Rate per 1,000 population: 0.44.

Rate for England and Wales: 0.48.

# REPORT OF THE MEDICAL OFFICER OF HEALTH FOR 1960.

# To the Chairman and Members of the Tettenhall Urban District Council.

Mr. Chairman, Ladies and Gentlemen,

As your Acting Medical Officer of Health I have the honour to present to you my Annual Report for the year 1960, and do so in accordance with requirements of the Ministry of Health as indicated in Circular 1/61. I incorporate information in respect of the work carried out by your Public Health Inspector in the course of the year.

During the year under review the health of your urban district has been satisfactory.

In view of the awaited Local Government Commission's findings and report, one postpones making suggestions or putting forward schemes which might merit consideration in the interests of the district health services.

At the moment the claim can justifiably be made that your district's requirements in respect of health services are adequately met and steps are always taken to remedy any imperfections that may disclose themselves from time to time.

Environmental control of Air Pollution, promotion of Noise Abatement, reduction of Accidents on the roads and in the home, measures against Hazards of Radiation and the introduction of Fluoridation of water have all been given consideration by your Health Committee. The introduction of triple or polyvalent vaccines to reduce the number of single injections now being given to children has also been raised.

Your Housing Committee has also contributed its valuable help in dealing with cases of ill-health aggravated by adverse housing conditions.

As regards housing I ask that your Housing Committee continue to give consideration in future housing schemes to the further provision of small bungalows, or ground floor single-

bedroom houses or flatlets designed for the comfort of old and disabled people, particularly in respect of structural convenience in internal fitments and safety in the way of absence of steps, non-slip floors, storage accommodation for wheel chairs and safety fitments to gas stoves.

Your Public Health Inspector in his report indicates how much the nature and field of an inspector's activities have changed over the years. Sanitation and environmental health, hygiene promotion, particularly in respect of food, health education and improvements in standards of housing and living, have now all become of priority importance in his work.

The population of the urban district as estimated, mid-year 1960, by the Registrar-General is now 14,020. The figure of the recently taken Census is awaited with interest.

The crude birth rate per 1,000 of the estimated population is 15.62. The comparability factor provided by the Registrar-General (0.87) brings this to a rate of 13.59 per thousand population, which is the standardised birth rate for 1960, the rate for England and Wales being 17.1.

The crude death rate per 1,000 estimated population is 10.91. The comparability factor being 1.25, the crude death rate becomes standardised to a rate of 13.64 per thousand population, the rate for England and Wales being 11.5.

The number of infant deaths was nine as compared with one in 1959, giving an infantile mortality rate of 41.1 as compared with 4.7 last year. The rate for England and Wales was 21.7 per 1,000 births.

The increase this year might read discouraging but, as I pointed out last year, the rate for a small community the size of Tettenhall may not have great statistical significance. The rate would appear to oscillate strongly from year to year.

Seven of the nine infant deaths occurred during the first two weeks of life; and of the seven, five of the deaths occurred under one week. Causes and ages at death are shown in appropriate Table of the Report.

There was one maternal death, this being the first since 1951, unfortunate, after our good record over the years.

The number of births exceeded the number of deaths by 66 which can be regarded as natural increase in the population.

The predominating causes of adult death continue to be heart disease, cancer, vascular lesions of nervous system and bronchitis.

Cancer of lung and bronchus were seven against five last year, all male; and Cancer all forms 32 against 21.

The prime mystery about cancer still remains; 20% of the deaths in the district being due to malignant disease.

Suicide, four against one and motor vehicle accidents, five against three.

The sex distribution of all causes of death is given in the relevant Table of the Report.

There was a considerable reduction in cases of infectious and other diseases, 70 as against 213 last year, whooping cough figuring largest with 38 as against one last year.

There was one death from poliomyelitis. Further comment is made on this case under the appropriate section of the report.

There has been no notified case of diphtheria in the district for twenty years which speaks well for the efficacy of immunisation against that disease. Nevertheless, in spite of this there must be no slackening in diphtheria immunisation and it is of paramount importance that the existing level of immunisation in the district be maintained.

There were no deaths from pulmonary tuberculosis but in respect of this disease 8 new cases were notified as against five last year. Further to this, 11 more cases were added to the register being inward – transfers from other or neighbouring districts.

Your Council does not exercise delegated powers in respect of health and welfare functions, such being the duty of the County authority. Nevertheless, it can be said that adequate consideration is given to the requirements of the district in respect of all such services by that authority.

As regards welfare services to the community the contribution made by local voluntary organisations, such as the Women's Voluntary Service, the British Red Cross Society, Old People's Clubs, etc., to supplement such services is much valued.

An appreciated service that has been initiated by the Women's Voluntary Service is that of provision of meals to elderly people living alone or physically handicapped. For this service—"Meals on Wheels"—you are much indebted to Mrs. Wright and her team of voluntary helpers who give their time so ungrudgingly to make the service a success.

Another appreciated welfare service now being operated by the County is that of chiropody for old people.

The services of the local detachment of the British Red Cross in the way of supplementary nursing assistance and provision of medical comforts have been available throughout the year and Mrs. Walker, the Commandant, is thanked for this valuable community service.

The District Nurses continue to give their invaluable services and merit commendation.

The Area Welfare Officer, Mr. R. C. Cox has again been of great assistance to me in dealing with the problem of finding hostel or institutional accommodation for the aged and infirm.

I thank the local medical practitioners for their continued co-operation.

I again convey my thanks to the Chairmen and Members of your Health and Housing Committees for their support throughout the year. I also record my appreciation of the efficient services of your Public Health Inspectors.

I am also indebted to your Surveyor for his co-operation and to all other colleagues, administrative and clerical.

To your Clerk I again convey my appreciation and thanks for advice on points of administrative procedure.

I have the honour to be,

Your obedient Servant,

F. B. MACKENZIE,

Acting Medical Officer of Health.

September, 1961.

# GENERAL PROVISIONS OF HEALTH SERVICES IN THE AREA.

The Medical Officer of Health holds office in virtue of a joint appointment by the Sedgley Urban District Council, the Tettenhall Urban District Council and the Staffordshire County Council on a time distribution basis of 5/11ths, 2/11ths and 4/11ths respectively.

As Medical Officer of Health of the Urban District his duties are those laid down under the various Public Health Acts and Regulations, in short to inform himself of all matters likely to affect the health of the Urban District and to advise the Council in such matters and to make an Annual Report on the work of the Public Health Department and the health of the district.

As Assistant County Medical Officer he undertakes such School Medical Inspections, Minor Ailment School Clinics, Immunisation Sessions and Maternity and Child Welfare Clinics in the Urban District as may be directed by the County Authority.

The Public Health Inspector is a full time appointment by the District Authority. He is a qualified Meat and Food Inspector. Under the general direction of the Medical Officer of Health he performs all the duties imposed on a public health inspector by statute and by any orders, regulations or directions from time to time made or given by the Minister, and by any byelaws or instructions of the local authority applicable to his office.

Public Health and Sanitary matters are brought forward in the Public Health Committee, while Housing and Rehousing matters are dealt with by the Housing Committee. These two Committees meet once monthly.

There are two Health Visitors, three Midwives and two General Nurses for the District, all under the direction of the County Council.

In accordance with Part III of the National Health Service Act the following services are provided by the Local Health Authority, namely the County Council, the organisation and administration being in the hands of the County Medical Officer of Health.

- (a) Health Centres.
- (b) Care of Mothers and Young Children.

- (c) Midwifery.
- (d) Health Visiting.
- (e) Home Nursing.
- (f) Vaccination and Immunisation.
- (g) Ambulance Services.
- (h) Prevention of Illness, care and after care.
- (i) Domestic Help.
- (j) Mental Health Services.

With the exception of provision of Health Centres, all the required services are being provided within the area.

There will probably be some delegation of Part III functions and other powers to the district authority in the near future.

#### School Health Services.

The Medical Inspection of School Children is provided by the County Council who have also established Ophthalmic, Dental and Orthopaedic Clinics. The various age groups are examined periodically and from the School Inspections referred to these Clinics or to the General Practitioner if so required.

In cases of Infectious Disease, and if deemed necessary special steps are taken in conjunction with the School Authorities to exclude scholars who have been in contact with such disease. Protective measures and isolation are furthermore under the direction of the Health Department.

The School, Dental, Ear, Nose and Throat, and Eye Clinics provided in the Urban District are given in a separate table together with sessions for Speech Therapy and Physiotherapy.

# Maternity and Child Welfare.

The Staffordshire County Council maintains an Ante-Natal and Child Welfare Clinic at Tettenhall and Child Welfare Clinics at Tettenhall Wood and Castlecroft.

The Regional Hospital Board provides in addition for Maternity cases in New Cross Hospital, Wolverhampton. The Beeches Maternity Home in Wolverhampton is also available by arrangement. Cases wishing to remain at home are delivered by the County Midwives who can call on the obstetric assistance of a General Practitioner if required.

The Staffordshire County Council also provides for the care and treatment of deformed, mentally sub-normal and handicapped children. These cases are selected from School Medical Inspections and Child Welfare Clinics or referred by General Practitioners. Illegitimate, Homeless and Neglected Children are provided for in Nurseries, Children's Homes and Remand Homes of the County.

#### National Assistance Act, 1948.

Since the passing of this Act the former Public Assistance Services ceased and were taken over by the National Assistance Board under the Ministry of National Insurance. The functions of the Relieving Officers have therefore been discontinued and replaced by the Officers of the National Assistance Board. The National Assistance Board holds no office in the Tettenhall Urban District.

As under the National Health Insurance everyone is now medically insured, the medical supervision and treatment of necessitous cases has become the responsibility of the Medical Practitioners and the Regional Hospital Board. Other classes of necessitous cases, such as homeless, abandoned or neglected individuals are the responsibility of the County Welfare Authorities.

# National Assistance Act, 1948.

National Assistance (Amendment) Act, 1951.

#### Removal of Persons in need of Care and Attention.

These Acts deal with the care of aged and infirm persons incapable of looking after themselves; and give powers to remove to a suitable hostel or institution if considered necessary.

#### Remark.

It has not been necessary during the year to exercise such powers.

#### Hospitals.

Administration of Hospitals and Specialist Services is the responsibility of the Birmingham Regional Hospital Board.

The Hospitals and Specialist departments serving the district and easily accessible, are those of Wolverhampton, Dudley and Birmingham.

Hospital treatment for cases suffering from Infectious Disease and in need of such treatment is provided in Moxley Hospital.

#### Tuberculosis.

Institutions are maintained by the Regional Hospital Board for the treatment of persons suffering from Tuberculosis. The visiting of Tuberculosis patients in relation to their care and after care is under the administration of the County Council. Chest Clinics are situated at Dudley and Wolverhampton and several Sanatoria are available.

# Laboratory Facilities.

Pathological and Bacteriological examinations are made by the Public Health Laboratory Service in Stafford.

#### Welfare Officers.

Area Welfare Officer: Mr. R. C. Cox, 6A, Birch Street, Wolverhampton.

Child Welfare Officer: Miss White, 153, Tettenhall Road, Wolverhampton.

Social Worker: Miss Burd, Old Police Buildings, Dudley.

#### Clinics and Treatment Centres.

# Tettenhall Welfare Centre, Upper Green.

Infant Welfare Centre.
Ante-Natal Clinic.
Relaxation and Parent
Craft.

Thursdays fortnightly 2 p.m. to 4 p.m. Thursdays fortnightly 10 a.m. to 12 noon.

Fridays weekly 2 p.m. and 3 p.m. (two sessions).

School Clinic.
Speech Therapy.

Thursdays fortnightly 10 a.m. to 12 noon. Monday and Wednesday afternoons.

(By appointment).

Physiotherapy.

Monday and Friday mornings.

(By appointment).

Eye Clinic. Chiropody. Wednesday mornings. (By appointment).

Tuesday mornings fortnightly.

Dental Clinic.

Friday afternoons. (By appointment).

# Tettenhall Wood, The Institute.

Infant Welfare Centre.

Thursdays fortnightly 2 p.m. to 4 p.m. Alternating with Infant Welfare Centre at Tettenhall.

#### Castlecroft.

Infant Welfare Centre. Wednesdays fortnightly 2 p.m. to 4 p.m.

Times and days of Clinics are of course liable to alteration from year to year.

# Old People's Clubs.

#### Lower Tettenhall.

In Charge.

" Welcome Club".

Mr. G. H. Humphries, "Sunnyside", Lower Street, Tettenhall.

# Compton.

"Remember Me Club".

Mrs. I. M. Davies, 175, Bridgnorth Road, Compton.

#### Tettenhall Wood.

"Forget-me-not-Club".

Mrs. W. F. MacNamara, 69, Mount Road, Tettenhall Wood.

# Upper Tettenhall.

"Tettenhall O.P. Club". Mrs. P. Dumbell, "The Gables", Wood Road, Tettenhall Wood.

#### Finchfield.

"Windmill O.P. Club". Mrs. E. G. L. Pearce, 79, Windmill Lane, Wightwick.

# Domestic Help Service.

This service is provided through the Area Health Office, Brierley Hill.

The number of Domestic Helps who gave service in the Urban District during the year was seven. The number of Neighbourly Helps employed was 4.

#### Ambulances.

The Ambulance services are operated by the County Council. An Ambulance is stationed in Tettenhall at the Fire Station, from 8 a.m. until 5 p.m. Monday to Friday, and from 8 a.m. to 12 noon on Saturdays. After these times the service is given from Tipton. The movement of all sitting and stretcher cases is controlled by Tipton Station (Telephone number Birch Street, Tipton 3121-2-3). Radio is fitted to approximately 75% of the vehicles and intercommunication and contact is operated through Tipton. This should contribute to the speeding up of the service.

The movement of Infectious Diseases, with the exception of Small-pox, is also dealt with through Tipton.

# VITAL STATISTICS.

Live Births	• •	• •	• •	• •	100	<i>F</i> . 111	Total. 219
Legitimate			• •		104	109	213
Illegitimate			• •		4	2	6
Live Birth Rate I Standardised Birt Illegitimate Live	th Rate	)				 ths	15.62 13.59 2.74
Ctill Birthe							5
Still Birth Pater						• •	
Still-birth Rate p Total Live and St	*		and S			• •	$\begin{array}{c} 22.32 \\ 224 \end{array}$
Infant Deaths		• •	• •	• •			9
Infant Mortality Legitimate Infan	Rate po	er 1,00	0 Live	Births	5		41.09
Live Births					• •		37.56
Illegitimate Infan Live Births							166.66
Neo-natal (first f Live Births							31.96
Early Neo-natal N	 Iortalit	y Rate	e (death	ns unde	er one v	veek)	01.00
per 1,000 Liv	ve Birth	ns				• •	22.83
Perinatal Mortali week combin							44.64
Maternal Deaths	(includi	ng abo	ortion)	• •			1
Maternal Mortalit	y Rate	per 1,	000 Li	ve and	Still B	Sirths	4.46
					M.	F.	Total.
Deaths							
Death Rate (Crud Standardised Dea Deaths from Cand	le)		• •	• •	• •		10.91
Standardised Dea	th Rat	e e gagl	• •	• •	• •	• •	13.64
Deaths from Mean Deaths from Mean	cer (an sles (all	ages)	• •	• •	• •	• •	32 Nil
Deaths from Who							Nil
Deaths from Gast							Nil

# CAUSES OF DEATH DURING THE YEAR 1960.

				M.	F.
1.	Tuberculosis, Respiratory				
2.	Tuberculosis, Other			—	
3.	Syphilitic Disease				
4.	Diphtheria				
5.	Whooping Cough				
6.	Meningococcal Infections				
7.	Acute Poliomyelitis			1	
8.	Measles				
9.	Other Infective and Parasitic Diseases				
10.	Malignant Neoplasm, Stomach			2	1
11.	Malignant Neoplasm, Bronchus			7	_
12.	Malignant Neoplasm, Breast				3
13.	Malignant Neoplasm, Uterus	• •	• •		$\frac{3}{2}$
14.	Other Malignant and Lymphatic Neop		• •	11	$\bar{6}$
15.	Leukaemia, Aleukaemia	1451115			
16.	Diabetes	• •	• •		1
17.	Vascular Lesions of Nervous System	• •	• •	14	7
18.			• •	14	17
19.	Hypertension, with Heart Disease	• •	• •	1	2
20.		• •	• •	5	$1\overline{2}$
		• •	• •	$\frac{3}{2}$	1
21.	Other Circulatory Disease	• •	• •	4	1
22.	Influenza	• •	• •	1	_
23.	Pneumonia	• •	• •	4	1
24.	Bronchitis	• •	• •	4	4
25.	Other Diseases of Respiratory System			9	
26.	Ulcer of Stomach and Duodenum	• •	• •	3	
27.	Gastritis, Enteritis and Diarrhoea		• •		
28.	Nephritis and Nephrosis	• •	• •	1	
29.	Hyperplasia of Prostate		• •	3	1
30.		• •	• •	_	1
31.	Congenital Malformations		• •	1	1
32.	Other Defined and Ill-Defined Diseases		• •	6	7
33.		• •	• •	3	2
34.	All Other Accidents	• •	• •	_	
35.	Suicide		• •	1	3
36.	Homicide and Operations of War	• •	• •		
	All Causes			83	70
	All Causes	• •	• •	00	10

BIRTH RATES.

	,	England		
Vaca	Number of	BIRTH	I RATE	England and Wales
Year.	Births.	Crude.	Standardised.	Birth Rate.
1951	130	16.6		15.5
1952	130	16.4		15.3
1953	165	17.4		15.5
1954	184	18.3		15.2
1955	164	15.2		15.0
1956	218	19.1		15.7
1957	207	16.79		16.1
1958	219	16.95	15.08	16.4
1959	210	15.60	13.57	16.5
1960	219	15.62	13.59	17.1

# DEATH RATES.

		England			
Year.	Number of Deaths.	DEATH	H RATE	England and Wales Death Rate.	
	Deaths.	Crude.	Standardised.	Death Nate.	
1951	136	17.3	14.8	12.5	
1952	86	10.8	9.3	11.3	
1953	78	8.2		11.4	
1954	117	11.6		11.3	
1955	130	12.1		11.7	
1956	114	9.9		11.7	
1957	129	10.46		11.5	
1958	109	8.44	10.13	11.7	
1959	123	9.01	11.44	11.6	
1960	153	10.91	13.64	11.5	

# INFANTILE MORTALITY, 1960.

Nett deaths from causes stated at various ages under one year of age.

Cause of Death.	Under 1 week.	1 to 2 weeks.	2 to 3 weeks.	3 to 4 weeks.	Total under one month.	1 to 3 months.	3 to 6 months.	6 to 9 months.	9 to 12 months.	Total Deaths under one year.
Cerebral Haemorrhage Broncho-	3				3					3
pneumonia		_					1		1	2
Atelectasis Intracranial	2				2					2
Haemorrhage		1			1					1
Paraplegia		1			1					1
Totals	5	2		_	7		1		1	9

# INFANTILE MORTALITY RATES.

Year.	Т	ETTENHALL	•	England and Wales Rate per 1,000	
rear.	Births.	Deaths.	Rate per 1,000 births.	births.	
1951	130	4	30.7	29.6	
1952	130	6	46.1	27.6	
1953	165	2	12.1	26.8	
1954	184	6	32.6	25.5	
1955	164	4	24.4	24.9	
1956	218	5	22.94	23.8	
1957	207	4	19.32	23.0	
1958	219	1	4.57	22.5	
1959	210	1	4.76	22.0	
1960	219	9	41.09	21.7	

# THE PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

The total number of notified cases of infectious disease was 70 as against 213 last year, exclusive of Tuberculosis.

#### Measles.

8 cases as against 177 last year.

#### Scarlet Fever.

7 cases as against 12 last year.

# Whooping Cough.

38 cases as against one last year.

#### Acute Pneumonia.

9 cases as against 20 last year.

# Erysipelas.

2 cases as against 1 last year.

# Puerperal Pyrexia.

1 case was notified.

# Meningococcal Meningitis.

1 case was notified.

# Dysentery.

3 cases were notified as against 1 last year.

# Poliomyelitis.

1 case was notified—Died.

Excerpts from information supplied by the Registrar-General.

"The Chief features of the returns of infectious diseases in England and Wales during 1960 were the continued large falls in the notifications of acute poliomyelitis and diphtheria. The incidence of acute poliomyelitis has fallen to the endemic level prevailing before the large outbreak of 1947; the incidence of diphtheria was the lowest ever recorded; and the deaths from influenza were the lowest for the past 60 years. The number of notifications of acute pneumonia was low, about one half the usual number: this would be expected, since influenza and pneumonia are correlated. Whooping-cough was at a fairly high level during the year. The notifications of dysentery showed a considerable rise on the preceding three years."

This is in keeping with returns of those infectious diseases in your area.

# Observation on Death from Poliomyelitis.

This was the case of Acute Paralytic Poliomyelitis in an eight year old boy brought to your notice in my monthly report for February, and from which he died on 27th February, 1960.

Although he had completed his primary course of Poliomyelitis vaccination in 1958 he had not received a subsequent reinforcing dose. He would appear therefore not to have acquired a sufficiently high level of immunity to protect him from the severe attack he had and the extremely rapid onset of paralysis which resulted in death.

The medical departments concerned made the appropriate enquiries relative to the case and to his vaccination history.

# Observations on Dysentery—(Shigella Sonnei)—4 cases.

(a) The first 3 cases occurred in a local family of five, father, mother and three children.

The affected members of the family were the mother and two daughters, ages 4 and 10 years, as far as bacteriological reports disclosed. The father did not appear to have been affected but a son aged 11 gave a history of

diarrhoea but had recovered at time of investigation and his bacteriological report was negative. The only factor that was common to two of the cases was that the son 11 and the daugher 10 had partaken of school meals but as such had been taken some days previous to notification no samples of the particular school meal were available for examination and as there had been no other cases of diarrhoea in the schools they attended and as the mother was affected and the daughter 4 who did not attend school, the cause could not be attributed to a school meal. The cases would therefore appear to have been of household or other origin. All the cases made a quick recovery on appropriate chemotherapeutic treatment.

(b) The 4th case was in a soldier age 19 home on leave. He gave a history of having been in Hong-Kong for 10 months and to have had diarrhoea when he left there on leave to come home.

Specimens were taken from the remainder of the local resident household and all were negative.

The source of the trouble would therefore appear to have been in Hong-Kong.

The soldier son's condition was reported to the Medical Officer of the unit to which he returned at Shrewsbury.

His final specimen taken before returning was negative.

#### Remark.

The incidence of dysentery in the country is fairly wide-spread. Actual cases probably far out-number the cases notified and there may be many wild cases to which the private doctor is not called; but it cannot be regarded as a grave menace to the health of a community when there are so many specific chemothera-peutic preparations available. Rather is it indicative of lack of hygiene in person and food.

An outbreak may be a menace from the economic point of view, in so far as it may mean loss in time, wages and production.

#### Cases Admitted to Hospital.

During the year seven cases were admitted to hospital as follows:—

	MOXLEY HOSPITAL—					
	Infective Hepatitis .				• •	1
	Pneumonia	•				1
	Septic Abortion	•	• •			1
	PRESTWOOD SANATORIUM-	_				
	Pulmonary Tuberculosis .	•	• •	• •		1
	ROYAL HOSPITAL, WOLVER					
	Poliomyelitis		• •	• •		1
	Meningococcal Meningitis .	•		• •		1
	THE LIMES HOSPITAL, HIML	EY—				
	Pulmonary Tuberculosis .	•			• •	1
Swa	bs and Specimens.					
	Submitted to the Public Health I	Labora	.tory:-	_		
	Sputa Swabs					7
	Cultures for Myco-Tuberculo	sis		• •	• •	6

#### General Measures.

School Notifications of Infectious Disease are received by the Health Department and carefully studied for any features necessitating prompt action.

When desirable the schools are disinfected and terminal disinfection of premises and articles in affected households which have been exposed to infection carried out in all cases.

#### Vaccination and Immunisation.

The County Council does not provide for a Vaccination Centre in Tettenhall, but arrangements can be made with the Medical Practitioners by those who wish themselves or their children vaccinated against Small-pox.

Immunisation against Diphtheria and Whooping Cough and Poliomyelitis Vaccination are undertaken in the Child Welfare and School Clinics, while special Immunisation Sessions in Schools provide for an increase in the immunity of the child population. The administration of Poliomyelitis Vaccination is in the hands of the Area Office at Brierley Hill.

With the advent of Poliomyelitis vaccine, and being in good supply, immunisation sessions have been held in all the schools in the area and at the Clinics in the course of the year.

Open evening sessions are also arranged for all ages up to 40.

Private Medical Practitioners are also prepared to vaccinate on request.

We have continued to avail ourselves of the opportunity given by the Central Council of Information to place advertisements in the Local Press in order to stimulate Diphtheria Immunisation.

#### Small-pox.

Cases of suspected Small-pox are notified to the Small-pox Consultant in cases of doubt, who then takes further charge of the disposal of the case. Local protective and preventve measures are under the direction of the Health Department.

The following information has been supplied by the Brierley Hill Area Health Office:—

# **Small-pox**—Vaccination.

Vaccinations performed during 1960:—

Number v	vaccinated	under I year	 	131
,,	, ,	1 to 4 years	 	19
,,	<i>)</i>	5 to 14 years	 	7
<b>)</b> )	,,	Over 15 years		8
				165
Number 1	re-vaccinated	5 to 14 years	 	4
,,	,,	Over 15 years	 	7
				11

# Diphtheria—Immunisation.

```
Children of school age who completed the full course of injections at 31st December, 1960, i.e., children born 1946—
1955 inclusive ... ... 2,068 (1,967)
```

Children under 5 years at 31st December,		
1960, immunised	702	(597)
Total number of children who have received		, ,
primary immunisation during 1960	323	(168)
Number who have had a reinforcing injection		, ,
during 1960	517	(99)

# Whooping Cough—Immunisation.

Number if children immunised during the year ended 31st December, 1960:—

Under 5 years of age From 5 to 14 years	• •		$205 \\ 4$	\
			209	(94)

(Figures in brackets relate to 1959).

# Poliomyelitis—Immunisation.

The information given here is in respect of the whole area covered by the Brierley Hill Area Health Committee.

Approximately 80% of children born in the years 1946-1960, had completed initial vaccination, at 31st December, 1960.

Of those who had received initial vaccination approximately 85% had also received a third, or re-inforcing injection.

DISTRIBUTION OF INFECTIOUS DISEASES. AGE-GROUPS AND LOCALITY

(EXCLUDING TUBERCULOSIS) MOTIFIED IN 1960.

	.1	Castlecrof		or and the second			1	1				
	•	Finchfield		-	П					1		63
	, λ	Wightwic	r(	_		1			promi	1		4.
		Compton.	ಣ	_	9		-		1		1	
	.booW l	Tettenhal			9	4	-			-	-	12
	.1.	Tettenhal	4	4	25	4		P	Í	<i>⊙</i> 1	-	41
	'umo	Age unkn							1			
	er.	vo bas 39		5		67						63
	ears.	45 to 65 y		1		23						्रा
2	ears.	So to 45 y				<b>©</b> 1	67	prod		pend		9
	ears.	15 to 25 y								-		
2	ears.	10 to 15 y	-	М								21
(010)	sie:	5 to 10 ye	ಣ	4	19						-	27
	rs.	4 to 5 yea		67	$\infty$	-				_		ಣ
COLLIN	rs.	3 to 4 yea	-	1	-							67
-	.rs.	2 to 3 year	23		5							-1
3	.rs.	I to 2 yea			က				-			ಬ
	ear.	Under 1 y		1	67	-						ಣ
	SEX.	(Li	ಣ	9	24	9	কা	proof		<b>₹1</b>		44
	ESE	Ĭ.	7.0	_	14	ಣ			-		—	26
	r£es·	Total all s	∞	<u>[-</u>	38	೧	63	П	П	ಣ	F=4	70
	DICEACE	UISEASE.	Measles	Scarlet Fever	Whooping Cough	Pneumonia	Erysipelas	Puerperal Pyrexia	Meningococcal Meningitis	Dysentery	Poliomyelitis	
			Mea	Sca	Wh	Pne	Ery	Pue	Mer	Dys	Poli	

# TUBERCULOSIS.

The number of new cases notified during the year was 8 Pulmonary as against 5 Pulmonary in the year 1959. There were no new Non-pulmonary cases notified.

			New C	Cases.		Deaths.			
Age Periods.	Age Periods.		Pulmonary.		Non- Pulmonary.		onary.	Non- Pulmonary.	
		М.	F.	М.	F.	M.	F.	М.	F.
Under 1 year									
l— 4 years		_	1					—	_
5— 9 years		1	—				_	_	_
10—14 years		_			_		_	_	—
15—19 years		_	1	—	_			—	_
20—24 years		_		_	—		_	_	—
25—34 years		1	1			_	_	—	
35—44 years	• •	—	—	_	_	<b>—</b>	_	_	—
45—54 years	• •	1	_	_	-		—	<del></del>	—
55—64 years		2	_			_	_		
65 and over					_		—		_
Totals		5	3	_			_	_	_

Yearly Figures for Last Decade.

77	New Cases.		Dea	iths.	Death Rate.		
Year.	Pulmonary	Non- Pulmonary	Pulmonary	Non- Pulmonary	Pulmonary	Non- Pulmonary	
1951	2		3		0.38		
1952	13	Between the co	1		0.13	_	
1953	15	1	1		0.105		
1954	14	1	2		0.199	-	
1955	13	1	1		0.093		
1956	15						
1957	7			•••			
1958	3			1		.077	
1959	õ	ì		1	-	074.	
1960	8				~		

# TUBERCULOSIS REGISTER.

At the end of the year 1960 our Register counted 66 cases of Pulmonary and 4 cases of Non-pulmonary Tuberculosis.

# Pulmonary Cases.

mber on Register at 31st December, 1959		64.
New cases           8         Inward transfers          11		
Less cases removed from Register 17		
Balance to be added to Register	• •	•)
Number on Register at 31st December, 1960	• •	66

#### Non-pulmonary Cases.

Number on Register at 31st December, 1959		4
New cases —		
Inward transfers —		
Less cases removed from Register —		
Balance to be added to Register	• •	
Number on Register at 31st December, 1960		4
and transfers from other districts		

#### Inward transfers from other districts.

Wolverhampton	 • •	 	7	
Coseley	 • •	 	1	
Codsall	 	 • •	1	
Durham	 	 	1	
H. M. Forces	 	 	1	 11

#### Remarks.

Although deaths from tuberculosis decrease, the incidence and notification of pulmonary tuberculosis in the country as a whole shows little or no diminution.

The increase in notifications may be partially due to the contribution mass radiography makes in detecting asymptomatic cases.

The health visitor finds it difficult in some cases to persuade the elderly person of the advisability of an X-Ray of the chest and the need of such is more when children and young adults are living in close domestic contact or in overcrowded conditions.

This accentuates the necessity of the co-operation by your Housing Committee in giving priority to housing recommendations in respect of tuberculosis households.

Your public health inspector in his report refers to the hazards which can be associated with a lack of hygiene in hairdressing and catering establishments. Such could be particularly so if even one unsuspected infective case occurred in a hairdresser or waiter.

#### SANITARY CIRCUMSTANCES OF THE AREA.

#### Sanitary Inspection.

The systematic inspection of the district has been carried out in an efficient manner. The general sanitary conditions of the district are on the whole satisfactory and there were no cases of disease or ill-health attributable to insanitary conditions.

Throughout the year your public inspector has continued to exercise his usual vigilance in respect of food hygiene and it is satisfactory to report there have been no cases of food poisoning in the district.

Details of your inspector's work is given in his report.

# Water Supply.

The Tettenhall Urban District is supplied by the Wolver-hampton Corporation Water Undertaking.

I am indebted to Mr. W. C. Johnson, M.I.C.E., M.I.Mech.E., M.I.W.E., Water Engineer and Manager, for the following information:—

- (i) The water supply has been satisfactory in quantity and quality.
- (ii) The following is a summary of the Bacteriological examination of water going into distribution.

No of Samples taken	Presumptive Coli-Aerogenes Organisms per 100 ml.					
No. of Samples taken.	0	1—2	3—10	Over 10		
947	920	15	7	5		
Percentage of samples taken	97.10	1.60	0.75	0.55		

- (iii) The water supplied is not liable to have plumbo-solvent action.
- (iv) There has been no known contamination of the water supply subsequent to leaving the works.

The population supplied from the mains in the District is 14,014. Of the houses in the district, 4,598 obtain water direct from the mains, and three houses have a well supply. These houses are situated at a considerable distance from the mains and connection to the Wolverhampton supply has proved to be uneconomical. Samples taken during the year for bacteriological examination proved satisfactory.

The results were as follows:—

	Plate Count Yeastrel agar 24 hrs. 370 C. aerobically.	Probable No. of coliform bacilli, MacConkey 2 days, 37oC.	Probable No. of Bact. coli (type 1).
Well No. 1, Wergs Hall Lodge 28th May, 1960— Filtered	Nil	Nil	Nil
30th May, 1960— Unfiltered	47	50	Nil
30th July, 1960— Unfiltered	74	90	Nil
Well No. 2, Dippons Gottage— 28th May, 1960	Nil	Nil	Nil
Well No. 3, Perton Mill Farm— 23rd June, 1960	Nil	Nil	Nil

# Swimming Baths.

There is only one small swimming bath within the district and these premises, a school, are under private control and not used by members of the public. The source of water is from the Wolverhampton Water Undertaking and is changed at least three times yearly, usually coinciding with school terms.

The treatment is a continuous process of heating, filtration and chlorination. Temperature is usually maintained at 70 deg. F. Checks are made daily by the school caretaker, and include tests for chlorine, pH and colour.

The bath is approx. 42-ft. x 26-ft. with an average depth of 4-ft. 6-ins. Bath walls and floors are of white glazed bricks and the building is of reasonable construction with good lighting.

The premises appear to be well maintained and under efficient supervision.

Bacteriological samples taken have always proved satisfactory.

Your Engineer and Surveyor (Mr. J. W. Mason, M.I.Mun.E., M.T.P.I.) has supplied me with the following information:—

# Sewerage and Sewage Disposal.

"During the past year the Sewage Farm at Blackbrook has been used and every effort was made to produce as satisfactory an effluent as was possible under the conditions experienced.

The new Sewage Disposal Works at Perton Mill have been making excellent progress during the year and it is anticipated that the new Works will be in operation by early May, 1961, which is in accordance with the programme of work set out by the consultant, Messrs. Willcox, Raikes and Marshall."

The Council's Sewage Pumping Stations at the Wergs, Waterdale and Castlecroft have been kept in a satisfactory condition and no major breakdowns have occurred during the year. The Pumping Station at Lower Street only deals with surface water from the new Lower Street development."

# House Refuse Collection and Disposal.

"The Wightwick Mill Farm site has continued in use for the disposal of house refuse and efforts have been renewed to obtain a satisfactory alternative site for use when the present sandmine is filled. This is proving very difficult in view of the shortage of suitable sites for this purpose and the assistance of the County Planning Officer has been sought.

In September the Council decided to purchase a Paxit Major II Refuse Vehicle with a view to improving the frequency of collection, as it is felt that with the larger vehicle fewer trips will be necessary to the tip and consequently more time will be available for the collection of the refuse.

A careful review has been made of the present system and it has been possible to increase the frequency of collections from once every nine days to an average of once in eight days.

In common with other authorities in the Midlands difficulties have been experienced in recruiting satisfactory labour for this task."

#### HOUSING.

Your Housing Manager, Mr. S. A. H. Berrisford, has furnished me with the following information:—

"The Council own, 1,006 houses of which 118 have been allocated to Wolverhampton Corporation for Overspill. The Overspill target is 300 in the 10 years 1957/1966.

During 1960, 137 Private and 82 Council houses were completed. Of the 82 Council houses 32 went to Wolverhampton Overspill, leaving the balance of 50 to meet both the rehousing of local families from houses under Demolition Orders and of families on the grounds of general need or medical recommendation.

From a postal survey carried out and rehousing during the year, the waiting list at the end of last year has now been reduced from 315 to 243 made up as follows:—

Childless Couples in Rooms		 61	
With Children in Rooms		 59	
Already in Occupation of a House		 73	
Applicants for Aged Persons Dwellings	S	 50	
			243."

The economic policy of the Government in withdrawing grant for general housing, increases the difficulty of reducing the waiting list.

Apropos long waiting lists, the Minister of Housing in reviewing the situation has drawn attention to the contribution the adoption of differential rents can make to the reduction of such lists. No doubt your Housing Committee have considered this.

Development of the Grange Estate is now completed and the final phase in the Lower Street Development scheme has now been reached.

As regards the housing estates, your Surveyor is to be commended on the way monotony in layout, as so often occurs in housing estates, has been overcome by variations in design and grouping.

The housing position to date in respect of unfit houses and of progress in Demolition and Clearance Areas are given in greater detail in the report of your Public Health Inspector.

The number of Representations for demolition made throughout the year may appear unduly large but all houses showing progressive structural deterioration as likely to make them unfit for human habitation before very long, must be considered.

Clearance Areas must be foreseen and decided upon years ahead and not suddenly when properties have actually reached the stage of unfitness for habitation and the necessity of the occupants being rehoused at once and no houses available and the Clearance Areas not likely to mature for two or three years and throughout that period the unfortunate occupiers have still to occupy and suffer in their impossible houses. Your public health inspector has borne this in mind in his surveillance of the district.

When individual properties tightly tied up in envisaged Clearance Areas are so bad and the elapse of time required for these areas to become operative so great, then Closing Orders should be made on such properties. Urgent medical cases cannot wait until Clearance Areas mature and should therefore receive individual consideration.

# Improvement Grants—Six have been made during the year.

Personally, I might be inclined to think this figure of six disappointingly low when it is taken into consideration that the purpose of the grant scheme is to enable owners to bring otherwise structurally satisfactory houses up to a higher standard in respect of modern amenities.

# Mortuary.

The number admitted to the mortuary during the year was 33.

# Danescourt Lawn Cemetery—Burials.

Mr. F. S. Pratt, Cemetery Superintendent, has supplied me with the following information:—

Adult Males					 	25
Adult Females					 	15
Children under	10 years	of age	<del></del>			
Male					 • •	2
Female					 	1
Still-born				• •	 	1
				Total	 0 0	44

Thirteen memorial tablets were placed in the Cemetery during the year.

During August, 1960, the construction of the Lodge and other cemetery buildings were completed and from 1st September, 1960, the day to day administration of the cemetery has been carried out at the cemetery office.

Various improvements have been carried out by the cemetery staff including a pathway from the main drive to workshop, and a hard core foundation laid in preparation for a tarmac top dressing.

A water tap has been permanently sited at the main entrance and a paved pathway laid.

The site around the cemetery building has been levelled and prepared for turfing during the spring of 1961.

The approach road to the cemetery, Coppice Lane, has been improved by levelling a wide verge from Wergs to the cemetery boundary wall. This will be seeded in the spring of 1961.

It is proposed that additional flowering shrubs will be purchased in the coming year to further furnish the cemetery border.

#### REPORT OF THE PUBLIC HEALTH INSPECTOR.

The pages which follow, set out in semi-statistical form some details of the work of the Department during 1960.

The policy of getting work completed without recourse to legal proceedings has been pursued and to a large extent has been successful. This type of procedure is often slow and one feels is looked upon as a sign of weakness and imposed upon by certain types of people who wish to evade their legal obligations.

To portray some substantial progress in a year's work on environmental hygiene is difficult and can easily be offset in a succeeding year by some setbacks; but when one reads the annual reports submitted to the Council sixty years ago, one can appreciate the real and tangible advance that has been made in all aspects of health and hygiene. At that time the population was estimated at 5,720 and there was an average of 4.87 persons to a house, compared with figures now of 14,020 for population and 4,601 dwellings, giving an average of 3.04 per house.

At the beginning of the century diseases such as Scarlet Fever, Diphtheria, Dysentery and Typhoid were then quite common in the district. Notifications of such diseases are now of rare occurrence.

The work of the Sanitary Inspector as he was then known was mainly concerned with inspections in respect of structural defects, overcrowding, house drainage, privies, water supply and infectious disease and the supervision of nightsoil and house refuse collection. As to reporting on food supplies and hygiene, the one and only comment that appears was with regard to a circular on the subject of arsenical poisoning from beer. So on retrospection one forms the opinion that the work of the Health Department was comparatively simple compared with the requirements of modern legislation on all aspects of environmental health and the current problems of radiation hazards.

The sanitary measures in force at the beginning of the century were the basis for the subsequent advance in the health and welfare of mankind and were a great contribution to environmental improvement; but work in a Health Department is of a progressing nature, and keeps forging ahead in a wider and enlarging sphere, requiring constant vigilance to keep in step with modern trends and ideas on the many facets of the varied problems that are constantly arising.

It gives me pleasure to thank Mr. G. I. Hyslop, Mr. A. Lockley and Miss V. M. J. Williams, for their valuable assistance and co-operation throughout the year.

### HOUSING.

Houses in Clearance Areas and Unfit Houses elsewhere, dealt with during the year, 1960:—

### A. Houses Demolished.

In (	Clearance Areas.	Houses Demolished.		ring the year. Families.
1.	Houses unfit for human habi-			
	tation		12	4
2.	Houses included by reason of bad arrangement, etc			
3.	Houses on land acquired under Sec. 43 (2) H.A. 1957			
Not in Clearance Areas.				
4.	As a result for formal or informal procedure under Sec. 17 (1) H.A. 1957	11	27	11
5.	Local Authority owned houses certified unfit by the M.O.H.		34	12
6.	Houses unfit for human habitation where action has been taken under local Acts			
7.	Unfit houses included in Unfitness Orders		_	

### B. Unfit Houses Closed.

		Number.		ring the year. Families.
8.	Under Sections 16(4), 17(1) and 35(1) H.A. 1957	2	10	2
9.	Under Sections 17(3) and 26 H.A. 1957		2	1
10.	Parts of buildings closed under Section 18 H.A. 1957			

# C. Unfit houses made fit and houses in which defects were remedied.

		By Owner.	By Local Authority.
11. 12.	After informal action by local authority After formal notice under	26	
	(a) Public Health Acts		<u> </u>
	(b) Sec. 9 and 16 H.A. 1957	2	
13.	Under Sec. 24, H.A. 1957	_	

# D. Unfit houses in temporary use (Housing Act, 1957).

Posi	tion at end of year.	No. of houses.	No. of separate dwellings contained in Col. (1).
14.	Retained for temporary accommodation—		
	(a) Under Section 48		
	(b) Under Section 17(2)		
	(c) Under Section 46		<u>—</u>
15.	Licensed for temporary occupation under Sections 34 or 53		

# E. Purchase of houses by Agreement.

	No. of houses.	No. of occupants of houses in Col. (1) (2)
16. Houses in Clearance Areas other than those included in confirmed Clearance Orders or Compulsory Purchase Orders purchased in the year	7	13

Details of action by the Public Health Committee, acting for the Council under **Delegated powers**, on individual premises following Official Representation.

1, 2 and 3, Wightwick Leys Cottages	Demolition Order January, 1960.
1A, Upper Green	Closing Order March, 1960.
10 and 12, Ormes Lane	Demolition Order, March, 1960.
18 to 30, The Holloway	Demolition Order November, 1960.
5, Deepmere Cottages	Undertaking accepted February, 1960.
29 and 31, Limes Road	Demolition Order April, 1960.
1 and 3, Nursery Walk	Demolition Order April, 1960.
1 to 7, Manor Street	Official Representation accepted March, 1960.
2 to 8, College Road	Official Representation accepted March, 1960.
15, Wrottesley Road	Demolition Order June, 1960.
The Lock House, Compton	Demolition Order, June, 1960.
61, Mount Road	Demolition Order December, 1960.
23 & 25, Wood Road	Demolition Order December, 1960.
1, Meadow View	Official Representation submitted November, 1960.
43 to 51, Mount Road	Official Representation submitted November, 1960.
31, Yew Tree Lane	Official Representation submitted December, 1960.

# Individual Unfit Houses Demolished during the year.

20 and 22, Finfield Road.
Cottage, Mill Lane.
8, 10 and 12, Canal Side Cottages.
Woodview, Mill Lane.
21, Yew Tree Lane.
10 and 12, Ormes Lane.
15, Wrottesley Road.

At the end of the year under review the following properties on which individual orders were operative were still occupied:—

Dtae of Order.

Address.

10, Oak Hill, Finchfield	February, 1955.
24, Limes Road, Tettenhall	September, 1955.
3 and 5, School Road, Tettenhall Wood	January, 1955.
58, Lower Street, Tettenhall	June, 1959.
7, Perton Grove Flat, Wightwick	July, 1959.
1, 2 and 3, Wightwick Leys Cottages,	
Tettenhall	January, 1960.
17 and 19, Wood Road, Tettenhall	
Wood	January, 1959.
1A, Upper Green, Tettenhall	March, 1960.
31, Limes Road, Tettenhall	April, 1960.
1, Nursery Walk, Tettenhall	April, 1960.
The Lock House, Compton	June, 1960.

Other sub-standard houses in the control of the Council which have been certified unfit and still remain occupied:—

27 to 39, Upper Street, Tettenhall ... Three occupied.
1 to 7, Manor Street, Tettenhall ... All occupied.
2 to 8, College Road, Tettenhall ... One occupied.

#### Lower Street C.P.O. Confirmed 1956.

One house still remains occupied in this scheme.

### Aldersley Road, Clearance Area.

The Council have now made some progress in acquiring most of this property and at the end of the year five houses were void.

### Bridgnorth Road, Clearance Area.

The Official Representation by the Medical Officer of Health was submitted to the Council in September, 1960, in respect of Nos. 77—143, Bridgnorth Road, Compton.

### Rehousing.

During the year 29 families were rehoused from various properties affected by Housing Act action.

#### Housing General.

From the original programme prepared in 1954, 66 houses remain outstanding for Housing Act action. Of these only six have been modernised.

A further survey of **sub-standard properties** within the district was completed during the year and it was approved that a further l15 houses should be added to the existing 1954 programme.

The main considerations taken in selecting properties for appropriate action have been:—

- (1) Imracticability of modernisation.
- (2) Smallness of accommodation.
- (3) Structural condition.
- (4) Services and facilities provided.

From the survey there has also been completed a list of houses numbering 234, which lack modern facilities but which would lend themselves to alteration and modernisation and would make reasonable dwellings for a considerable number of years.

Statutory notices were served in respect of the provision of additional facilities at two houses which were in multi-occupation. At the end of the year one notice was complied with.

The problem of houses occupied by several families is one which bristles with difficulties. Fortunately this problem has not reached the proportions in Tettenhall as in other urban communities but this is one which needs constant supervision and vigilance to prevent deterioration in general standards.

Two houses were repaired and provided with better facilities after service of statutory notice under the repair section of the Housing Act.

### Overcrowding.

No cases of actual legal overcrowding were reported to the Council during the year.

One family was rehoused for conditions akin to overcrowding, on moral grounds.

I am of the opinion that the present legislation for over-crowding is out of date by modern standards. The generally accepted yardstick by the public is based on bedroom availability and not on the basis of the Housing Act which takes into account all rooms except the scullery as being suitable for living and sleeping purposes. Allowing children under 10 years only half the area accommodation of an adult and discounting children under one year as of no account appears incongruous when youngsters appear to require more floor space for all their activities.

#### Improvement Grants.

The sum of £1,081 was paid during the year to the owners of six private properties for works of improvement or modernisation completed.

Considerably more interest is being shown by owners in the working of this scheme but it is felt that many more houses could be brought within its scope.

#### Moveable Dwellings.

Reports were submitted to the Council on this type of habitation in respect of 11 at the Wergs and 2 at Finchfield. At the end of the year the Wergs Site was cleared and only two remained in occupation at Finchfield.

During the year new legislation came into force—the Caravan Sites and Control of Development Act, 1960. This should provide more effective control on those types of dwellings.

The previous licensing control under Section 269 of the Public Health Act, 1936 is now repealed. However, the provisions relating to statutory nuisances under Section 268 wstill apply.

#### Rent Act.

Two certificates of disrepair were cancelled. One Certificate of disrepair was issued. The necessary work was completed at one house following notice of proposal to issue Certificate.

The application of this legislation for the repair of houses does not appear to be having the success the measure deserves. The public appear to have difficulty in understanding the procedure of the Act to use it to the best advantage.

#### Shops Act, 1950.

Within the district there are 115 shops. This is an increase of four over last year and the majority, 71, in all, retail foodstuffs of some nature, including four off-licence premises. There are also 23 full-licensed premises within the district.

The area as a whole appears to be better catered for in general domestic and personal shopping services than in the past, due to the development of new shopping areas in Castlecroft and Finchfield. The grouping together of shops attracts a greater variety of businesses to one area and provides a better service to the public.

I have received some criticism from the public of the inadequacy of the shopping facilities in one part of the district and I am of the opinion that this is to a large extent justified.

Most of the shops are small establishments under private management or self-employed, only employing one, two or three staff.

Regular inspections have been made of all the premises. These are mainly carried out in conjunction with work under the Public Health Act and Food and Drugs Act.

The general standards of the shops and facilities are good and no statutory action was found to be necessary during the year. The provision of mechanical ventilation was provided in one shop after informal action.

Advice was given to traders regarding Sunday Trading and they were also provided with printed instructions for display on the premises where necessary.

Advice on the enforcement of the provisions relating to the employment of young persons was given. Eight tradespeople were requested to display the necessary statutory forms and give details of hours of work.

Mobile shops have also been regularly inspected throughout the district and outside of delivery vans, 17 vehicles are used in this class of business.

# Sanitary Accommodation and Drainage.

During the year 54 notices have been served for defects under this heading. The number of waste water lavatories has

been reduced by 7, 3 having been converted and 4 discontinued through the premises being demolished. With the exception of 6 houses which will be the subject of Housing Act action, there remain 19 of those undesirable fittings to be modernised.

The use of one pail closet was discontinued at a house when the premises became void following Housing Act action. Of the four remaining pail closets, three are at houses which have received approval for modernisation, and only one house is occupied. The other pail closet is at a small factory premises in the Compton area.

In previous annual reports I have made comment on the necessity for the elimination of septic tank drainage systems in the Perton Road, Pattingham Road, Keepers Lane, Wergs Hall Road, Grove Lane, and Ash Hill areas and the need for the provision of public sewers. It is pleasing to note that the Council have approved in principle a scheme for sewers in the Perton Road area. It is to be hoped that efforts will be made to extend in the very near future these facilities to the other areas.

#### FOOD INSPECTION AND HYGIENE.

# Meat Inspection.

The following table gives the number of animals slaughtered and percentages of number affected with disease:—

Carcases and offal inspected and condemned in whole or in part.

	Cattle, excluding	Cows	Calves	Sheep	Pigs	Horses
	Cows.	Cows	Carves	Lambs	1 185	1101565
Number killed (if known)	398	Nil	4	2610	1353	Nil
Number inspected	398	Nil	4	2610	1353	Nil
All diseases except Tuberculosis and Cysticerci. Whole carcases condemned	Nil	Nil	Nil	Nil	Nil	Nil
Carcases of which some part of organ was condemned	20	Nil	Nil	5	13	Nil
Percentage of the number inspected affected with dissease other than Tuberculosis and Cysticerci	5.0	Nil	Nil	0.1	0.9	Nil
Tuberculosis only. Whole carcases condemned	Nil	Nil	Nil	Nil	Nil	Nil
Carcases of which some part or organ was condemned	1	Nil	Nil	Nil	31	Nil
Percentage of the number of inspected affected with Tuberculosis	0.2	Nil	Nil	Nil	2.2	Nil
Cysticercosis.  Carcases of which part or organ was condemned	Nil	Nil	Nil	Nil	Nil	Nil
Carcases submitted for treatment by refrigeration	Nil	Nil	Nil	Nil	Nil	Nil
Generalised and totally condemned	Nil	Nil	Nil	Nil	Nil	Nil

Outside of trimmings and strippings the following were condemned:—

35 lbs. of meat. 641 lbs. of offal.

This was disposed of by incineration or by delivering to the digestor plant at Wolverhampton Abattoir.

The duties of meat inspection can be an onerous task as the work is of necessity largely carried out outside or normal office hours. This is necessary to ensure that all home killed meat is inspected and to assist in the early morning clearance of meat and offal from hanging rooms to refrigerators and shops.

The Slaughterhouse Report was prepared in accordance with the Act after discussions with the trade, submitted to the Ministry and was finally approved with the appointed day for 1st January, 1962. The report summarises the structural requirements to bring the affected premises into line with the new Regulations made under the Act.

Only two Slaughterhouse Licences were renewed during the year. One other was discontinued after discussions with the owner regarding the cost of necessary work.

### Slaughter of Animals Act, 1933—1954.

Twelve licences to slaughter animals were renewed during the year.

### Food Inspection.

Regular Inspection of all foodstuffs is carried out at shops, storeplaces, food preparing premises and on vehicles.

The following articles were condemned during the year:—

2 tins of Asparagus Tips.1 tin of Asparagus Spears.

1 tin of Apricots.

1 tin of Bean Curd.

23 jars of Cheese Spread (mixed).

1 tin of Chicken and Ham.

1 tin of Corned Beef.

1 tin of Fruit Cocktail.

7 tins of Fondue.

7 tins of Grapefruit.

1 tin of Ravioli.

1 tin of Tortellini.

3 tins of Ham.

1 tin of Macaroni.

1 tin of Mock Turtle Stew.

4 tubes of Neopolitan Sauce.

6 tins of Ox Tongue.

2 tins of Pork Luncheon Meat.

3 tins of Peaches.

2 tins of Peeled Tomatoes.

3 tins of Pumpkin.

1 tin of Pears.

2 tins of Sweetened Cucumbers.

2 tins of Shrimps.

4 tins of Young Berries.

1 tin of Yellow Soya Beans.

1 tin of Zuurool Sauerkraut.

25 lb. of Fat and Trimmings.

49 lb. of Hind quarter meat.

 $12\frac{3}{4}$  lbs. of Liver Sausage.

During the year the number of actual complaints by members of the public was small. These were concerned with food not of the nature, substance or of quality demanded. No statutory action was taken.

The following is a summary of the cases brought to the department for investigation.

One small sliced loaf with string in substance. Warning letter sent.

Bread roll with hairs in substance.

Passed to Local Authority where purchased.

Consignment of blighted potatoes.

Returned and destroyed by Authority from where distributed.

Decomposition in joint of fore-quarter beef.

No action taken through time lag between purchase and bringing to the notice of the department.

Two bottles of sterilised milk with fine deposit.

No action taken except report to controlling Authority.

Deposit believed to be natural constituent of milk.

#### Ice-Cream and Ice-Lollies.

Only seven samples have been taken and submitted for examination, with the following results:—

2 ice-cream lollies						G.1
1 carton ice-cream						G.1
3 samples of ice-cream	taken fro	om bull	k suppl	lies at h	otels	G.1
1 sample of ice-cream t	aken fro	m bulk	suppl	ies at h	otels	G.3

#### Food Premises.

The following tables gives the various types of food business carried on throughout the district. In some instances premises carry on various types of business:—

Type of Business.						No.
Canteens and premises w	vhere	meals ar	e prap	pered	• •	27
Fried Fish Shops		• •				2
Butchers				• •	• •	12
Grocers						44
Shops selling sweets and	l conf	ectionery	y			11
Chemists						5
Licensed premises		• •				23
Off-Licence premises						4
Slaughterhouses		• •			• •	2
Premises Registered for	the n	nanufact	ure of	sausage	e, or	
potted, pressed, pickle	ed or	preserve	d food		• •	7
Shops selling milk		• •				18
Shops retailing ice-crean	n	• •	• •		• •	25
Licensed Game Dealer		• •	• •		• •	1

245 inspections were made of premises where food is handled, prepared and retailed. 26 informal notices and one statutory notice were served for various types of improvements.

Plans were approved for the enlargement of the kitchens at two hotels following informal action.

During the course of inspections efforts are made to improve the standards of hygiene in all aspects of the food trades and it is found that most success is achieved and the goodwill and cooperation of all concerned obtained by informal approach, regular inspections and talks with staff and management.

The increasing use of refrigeration throughout all food premises in the district is a considerable factor in reducing wastage and deterioration. Refrigeration practice is now the accepted rule rather than the exception of a few years ago.

The work of maintaining high standards in food hygiene plays an increasing part in environmental health and requires constant vigilance, considerable tact and patience. Much work has been done but no relaxation in efforts can be allowed as the aim is for continually improving standards.

The increasing use of pre-packing and containers by the grocery trade points to the need for greater storage space in shops and space for empties and returnable containers. The storage facilities in some modern shops does appear inadequate and lends to general untidyness, and unsatisfactory conditions.

The inspection of mobile shops found retailing in the area has also been carried out and where necessary the provisions of the Hygiene Regulations have been brought to the notice of owners.

By and large the general standards throughout the district are good.

The 1955 Food Hygiene Regulations were amended in 1960 with minor alterations.

#### Milk.

There is little to report other than routine work on milk supplies. Only bottled Designated milk is sold within the area. There are no dairy plants within the district and it is safe to conclude that the milk retailed in the district is safe for human consumption without further treatment.

The following tables gives a summary of licences issued to Distributors in the area.

Designation.		Supplementary Licences.	Dealer's Licences.	Total.
Tuberculin Tested	• •	5		5
Pasteurised		5	2	7
Sterilised		5	18	23

The results of bacteriological examinations of samples of milk taken within the district and examined by the Public Health Laboratory Service are set out in the following table:—

Designation.	No. of samples sub-	Phe phtha		Pho phat		Turbidity		Methylene Blue.	
Designation.	mitted.	Pass	Fail	Pass	Fail	Pass	Fail	Pass	Fail
Tuberculin Tested	5							5	_
T.T. (Past.)	17			17				14*	
Pasteurised	11		_	11				9*	—
Sterilised	10	_		_		10			

<sup>\* 3</sup> remaining colour tests owing to high Atmospheric Shade Temperature.

### FOOD AND DRUGS ACT, 1955.

I am indebted to the Medical Officer of Health of the County Council for the following information regarding samples of food taken in Tettenhall.

### Details of Milk and General Foods taken during 1960.

Articles of Food.	No. Samples	Satisfactory.	Unsatisfactory.
Milk	13	13	_
General Foods	25	23	•)

<sup>\* 2</sup> remaining colour tests void owing to high Atmospheric Shade Temperature.

Details are set out as follows:—

#### Milk.

Tuberculin 7	lested			1	
Tuberculin 7	Sested (Pa	steuri	sed)	6	
Pasteurised	• •		• •	3	
Sterilised				3	
				regeneralization delightness	
				13 All	genuine.
					0

#### General Foods.

Number of samples	taken	25
Number of samples	genuine	23
Number of samples	0	2

### Particulars of Adulterated Samples.

### Savoury Minced Steak—Informal Sample.

Contains only 77.4% of meat and so should be described as "Savoury Minced Steak in Gravy".

To await report of the Food Standards Committee on Tinned Meat.

### Mintoes—Formal Sample.

Only 22.5% of the fat consists of butter-fat; the failure to include in the list of ingredients the non-butter fat might be regarded as misleading.

Labels to be amended.

#### Classification of General Foods—25.

Savoury Minced Steak.	Ravioli in Tomato Sauce.			
Steakburgers.	Anchovies in Pure Olive Oil.			
Ice-Cream.	Cooking Fat.			
Fruit Fizzers Sweets.	Condensed Machine Skimmed			
Mintoes.	Milk.			
Royal Butter Mints.	Chopped Ham.			
Royal Butter Mints.	Pork Pie.			
Horseradish Sauce.	Chicken, Ham, Mushroom Pie.			

Pork Sausage containing preservative (4 samples).
Creamed Potato Whirls.
Steak and Kidney Pie.
Improved Instant Coffee.

Dairy Cream Baskets. Fresh Cream Butter. Dairy Cream Doughnuts. Dairy Cream Horns.

#### CLEAN AIR.

Only two complaints were received during the year on the problem of atmospheric pollution and these related to under feed stokers in modern installations. After investigation, improvement was effected by revising the frequency of cleaning the fires and the method of bringing the furnaces back into peak load. No further complaints have been received.

The main impressions gained after the work done on the proposed Smoke Control Area in the Western part of the district were that the great majority of people want clean air and less of the domestic drudgery associated with dirty coal fires and stoves. A minority do not want any upset in their domestic ways of cooking and heating even though uneconomic and the cause of much household labour. The major opposition was made and created by those whose business it is to sell raw fuel and who appear to stimulate local and national opposition. All major public improvements do affect a minority in some adverse way, but that is the price that has to be paid for any advancement for the general good.

I am of the opinion that the time is now ripe and opportune for this scheme to be brought back into effect.

#### ROUTINE INSPECTION WORK.

Summary of the inspection work carried out during the year is given in the following table:—

Type of Premis	Number of Inspections.					
Water, Drainage and Sanitary S	121					
Refuse		• •	• •	• •	45	
Rodent Control					175	
Repairs to Premises					273	
Food Premises			• •		203	
Meat Inspection			• •		397	
Infectious Disease				• •	37	
Shops other than Food Premises	3		• •		51	
Factories				• •	42	
Housing Act					489	
Clean Air Act	• • • • •	• •			27	
Miscellaneous		• •		• •	143	
	Total	• •		• •	2003	
GENERAL INFORMATION REGARDING NOTICES SERVED DURING THE YEAR.						
Form of Notice.	No. Serve	d.	Premi	ses.	Defects.	
Informal:  General Sanitary Defects	168		236		260	
Statutory:  Defects	23		26		60	

No legal proceedings were necessary.

In addition by informal action 177 dustbins were provided to private houses.

#### RODENT CONTROL.

This work is carried out by Mr. A. Lockley on a part-time basis for the Department and is done in accordance with the Ministry's recommendations.

During the year under review treatments were carried out at 136 domestic premises. Treatments were also carried out when necessary at Council properties such as refuse tip, sewage farm, allotments, garages, pumping stations, County Council properties at five schools and five other premises were also treated.

The annual test baiting of sewers was carried out when 95 manholes were test baited with five resultant takes. In the subsequent poison treatment 22 manholes were treated until the infestation was cleared.

The work of rodent control has been routine in character throughout the year, and I am of the opinion that the rodent population is on the decrease. The public are becoming more conscious of the need for this service and are more willing to cooperate in the elimination of these pests.

The majority of domestic infestations occur in and around garden sheds, fowl pens, and fuel stores which provide the necessary cover when misguided people leave waste food in their gardens supposedly for birds. Much of the advisory work on this service is given over to rat proofing sheds and the inadvisability of feeding birds with scraps of food spread over the garden.

No statutory action was necessary during the year.

#### PEST CONTROL.

Only one serious flea instation was found and treated during the year. 33 other minor infestations were treated in respect of wasps, mortar bees and cluster fles.

Considerable advice is given to the public on the treatment necessary for the elimination of silver fish, beetles, ants, etc., and when necessary insect powder is distributed free of charge.

This type of work has to be carried out by Mr. Hyslop and myself and can be very time taking and should in all fairness be carried out by an operator.

### FACTORIES ACTS, 1937 AND 1959.

The report of the Factories Acts inspections made during the year is appended.

# NOISE ABATEMENT ACT, 1960.

This legislation came into operation in the latter part of the year and is the first real tangible effort to control noise or vibration which previously would amount to a nuisance at common law. Such now becomes a statutory nuisance which can be dealt with according to the procedure used under the Public Health Act, 1936.

The Act also deals with the use of loudspeakers in streets but does not apply to noise or vibration caused by aircraft.

The complications and difficulties of operating this Act in respect of complaints can be extensive as noise and vibration can produce very different reactions in individuals.

At the end of the year no action was taken under this new legislation.

#### MISCELLANEOUS.

Disinfection of books is carried out as required for the Tettenhall Wood Library and Finchfield Library following cases of infectious disease in the borrowing household.

### Hairdressing Establishments.

Special attention was paid to this type of premises because it is generally recognised that a certain amount of public health hazard can be associated with a lack of hygiene in hairdressing, through the transmission of infections to the skin and scalp.

It was found that the standards were good and the purpose of the inspections were to encourage the use of proper sterilising liquids for utensils and equipment.

#### Agricultural Act, 1956 (Health Provisions).

Inspections of the 9 farm holdings within the district for the purpose of implementing the provisions of this Act was carried out and informal notices were sent in respect of five, for the provision of permanent facilities. It was found that the amount of casual labour employed on the farms during peak periods was negligible and no special consideration was given to the problem of providing temporary facilities in fields.

### Pet Animals Act, 1951.

No action was found necessary during the year.

#### Heating Appliances (Fireguards) Reg. 1953.

No action was taken during the year.

E. BARNES,

Public Health Inspector.

# FACTORIES ACTS, 1937 TO 1959.

# Part 1 of the Factories Act, 1937.

1. Inspections for purposes of provisions as to health (including inspections made by Public Health Inspectors).

Premises	Number	Number of				
(1)	on Register. (2)	Inspections. (3)	Written Notices. (4)	Occupiers Prosecuted. (5)		
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	3	2				
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	18	22				
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises)	25	20	2			
Total	46	44	2			

# 2. Cases in which defects were found.

	No. of C	ases in which	ch Defects w	vere found	No. of cases in
Particulars.			Refe	which	
r ai ticulais.	Found.	Reme- died.	To H.M. Inspector.	By H.M. Inspector.	prose- cutions were instituted.
(1)	(2)	(3)	(4)	$\begin{array}{c c} \text{Inspector.} \\ (5) \end{array}$	(6)
Want of cleanliness (S.1)		_			
Overcrowding (S.2)		_			
Unreasonable temperature (S.3)					
Inadequate ventilation (S.4)					
Ineffective drainage of floors (S.6)		_	_	_	
Sanitary Conveniences (S.7)—					
(a) Insufficient	2	2			
(b) Unsuitable or defective					
(c) Not separate for sexes		_			
Other offences against the Act (not in- cluding offences re- lating to Outwork)					
Total	2	2	_		

59

### Part VIII of the Act. Outwork.

	Section 110.	,		Section 111.	
No. of out-workers in August list required by Section	No. of cases of default in sending lists to the Council.	No. of prosecutions for failure to supply lists.	No. of instances of work in unwholesome premises.	Notices served	Prose- cutions.
110(1) (c).	(2)	(3)	(4)	(5)	(6)
-			-	_	_





